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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	
	First Inventor	Collie Brown
	Title	
	Express Mail Label No.	ER 326585784 US

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i> 3. <input checked="" type="checkbox"/> Specification [Total Pages _____] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets _____] 5. Oath or Declaration [Total Sheets _____] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i> 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Reader Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies
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ACCOMPANYING APPLICATION PARTS	
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: _____	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☒ Continuation
 ☐ Divisional
 ☐ Continuation-in-part (CIP)
 of prior application No.: 60396381 -3399

Prior application information: Examiner _____ Art Unit: _____
 For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS							
<input type="checkbox"/> Customer Number: _____				OR <input type="checkbox"/> Correspondence address below			
Name	Collie D. Brown						
Address	206 North Columbus Ave						
City	Mount Vernon	State	NY	Zip Code	10552		
Country	USA	Telephone	914-665 7610	Fax			
Name (Print/Type)	Collie Brown			Registration No. (Attorney/Agent)			
Signature	[Signature]			Date	7/16/03		

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
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PATENT APPLICATION FEE DETERMINATION RECORD						Application or Docket Number	
Substitute for Form PTO-875							
CLAIMS AS FILED – PART I <div style="display: flex; justify-content: space-around;"> (Column 1) (Column 2) </div>							
FOR	NUMBER FILED	NUMBER EXTRA				SMALL ENTITY	OR
BASIC FEE (37 CFR 1.16(a))						RATE	FEE
TOTAL CLAIMS (37 CFR 1.16(c))	20	minus 20 =	0				\$ 370
INDEPENDENT CLAIMS (37 CFR 1.16(b))		minus 20 =	0				0
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						X \$ =	0
						X \$ =	
						X \$ =	
						+ \$ =	
						TOTAL	370
* If the difference in column 1 is less than zero, enter "0" in column 2.							
CLAIMS AS AMENDED – PART II <div style="display: flex; justify-content: space-around;"> (Column 1) (Column 2) (Column 3) </div>							
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA			RATE	ADDITIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**	=	X \$ =	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	X \$ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ =	
						TOTAL ADD'L FEE	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA			RATE	ADDITIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**	=	X \$ =	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	X \$ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ =	
						TOTAL ADD'L FEE	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA			RATE	ADDITIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**	=	X \$ =	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	X \$ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ =	
						TOTAL ADD'L FEE	
<p>* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</p> <p>** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".</p> <p>*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".</p> <p>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</p>							

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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